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ASST. AUDITOR-CONTROLLERS

ROBERT A. DAVIS JOHN NAIMO JUDI E. THOMAS

August 28, 2009

TO:

Supervisor Don Knabe, Chairman

Supervisor Gloria Molina

Supervisor Mark Ridley-Thomas Supervisor Zev Yaroslavsky

Supervisor Michael D. Antonovich

FROM:

Wendy L. Watanabe

Auditor-Controller

SUBJECT:

GROUP HOME PROGRAM MONITORING REPORT - HATHAWAY-

SYCAMORES CHILDREN AND FAMILY SERVICES – EL NIDO GROUP

HOME

We have completed a review of El Nido Group Home (Group Home or Agency) operated by Hathaway-Sycamores Children and Family Services. The Group Home contracts with the Department of Children and Family Services (DCFS) and the Probation Department.

El Nido Group Home is a 48-bed facility, which provides care for boys ages 6-17 years who exhibit behavioral, social and emotional difficulties. At the time of the monitoring visit, El Nido Group Home was providing services for nineteen DCFS children, four Probation children and seventeen privately placed children.

El Nido Group Home is located in the Fifth District.

Scope of Review

The purpose of our review is to determine whether the Agency is providing the services as outlined in their Program Statement. In addition, the review covers basic child safety and licensing issues and includes an evaluation of the Agency's Program Statement, internal policies and procedures, child case records, employee records, a facility inspection and interviews with children placed in the Group Home at the time of the review. Interviews with children are designed to obtain their perspectives on the

Board of Supervisors August 28, 2009 Page 2

program services provided by the Agency and to ensure adherence to the Foster Youth Bill of Rights.

Summary of Findings

Generally, the Agency is providing the services as outlined in their Program Statement. However, the Agency needs to address several deficient areas. Specifically, the Group Home needs to repair the roof of Baldwin Cottage and the exterior stucco of the Nurse's building and clean, replace and make repairs throughout the cottages. The Group Home also needs to include input from all members of the treatment team in the development and implementation of the Needs and Services Plans and provide children with the required minimum weekly allowance.

Attached is a detailed report of the review.

Review of Report

We discussed our report with the Agency's management. In response to the recommendations made in the report, the Agency's management completed a corrective action plan (attached) which we approved. We thank the management and staff for their cooperation during our review.

If you have any questions, please contact me or have your staff contact Don Chadwick at (213) 253-0301.

WLW:MMO:JET:DC:AA:gfw

Attachment

c: William T Fujioka, Chief Executive Officer
 Patricia S. Ploehn, Director, DCFS
 Ted Myers, Chief Deputy Director, DCFS
 Susan Kerr, Senior Deputy Director, DCFS
 Robert B. Taylor, Chief Probation Officer
 Robert Fitzgerald, Board Chair, Hathaway-Sycamores Children and Family Services
 William Martone, Executive Director, Hathaway-Sycamores Children and Family
 Services
 Public Information Office

Audit Committee

Hathaway-Sycamores Children and Family Services El Nido Group Home Inglewood, California 91101 License Number: 197804907

Rate Classification Level: 14

I. Facility and Environment

Method of assessment - Observation

Comments:

El Nido Group Home is located in a residential community. Generally, the exterior of the Group Home is well maintained. The grounds are clean and adequately landscaped. However, several shingles are missing on the roof of the Baldwin cottage and the stucco is cracked around the exterior of the Nurse's building.

Overall, the interior of the Group Home is well maintained. The common quarters are neat, there is adequate furniture and lighting, and the Group Home provides a home-like environment. However, the dining hall carpet is stained. In the Baldwin cottage, the living room wall, kitchen ceiling and window blinds are dirty. In the Rowland cottage, the stovetop is dirty and there is mildew in the bathroom shower and writing on the bathroom door. In the Hunter cottage, a stove burner is broken.

Children's bedrooms are orderly and have age-appropriate personalized decorations. There is adequate lighting and storage space. Window coverings and window screens are in good repair. The mattresses are comfortable, the beds all have a full complement of linens, and children's sleeping arrangements are appropriate. However, several of the bedrooms have writing on the walls, closets, bulletin boards and desks. In addition, in the Rowland and Hunter cottages, several of the walls and desks are damaged.

The Group Home maintains age-appropriate and accessible recreational equipment. There are also board games, a TV and a DVD player. Books and resource materials, including a computer with a variety of programs, are also available.

The Group Home maintains a sufficient supply of perishable and non perishable foods.

Recommendations

- 1. Hathaway-Sycamores management:
 - a. Repair the exterior stucco of the Nurse's building.
 - b. Repair the roof on the Baldwin cottage.

- c. Clean the dining hall carpet.
- d. Clean the wall, kitchen ceiling and blinds in the Baldwin cottage.
- e. Clean the stovetop in the Rowland cottage.
- f. Remove the mildew from the bathroom shower and the writing from the bathroom door in the Rowland cottage.
- g. Repair the stovetop burner in the Hunter cottage.
- h. Repair and clean the bedroom walls and closets as needed.
- i. Replace the bedroom bulletin boards and desks.

II. Program Services

Method of assessment - Review of relevant documents and interviews

Sample size: Four

Comments:

Children meet the Group Home's population criteria as outlined in their Program Statement. Children are assessed for needed services within thirty days of placement. Case files reflect adequate documentation to show that children are receiving treatment services.

The Needs and Services Plans (NSPs) are current, comprehensive and include short and long term goals. However, the treatment team does not participate in the development or implementation of the NSPs.

Recommendation

2. Hathaway-Sycamores management include input from the treatment team in the development and implementation of the Needs and Services Plans.

III. Educational and Emancipation Services

Method of assessment – Review of relevant documents and interviews

Sample size: Four

Comments:

Children are attending school. Children are provided with educational support and resources to meet their educational needs and are progressing satisfactorily in school. The Group Home's program includes the development of children's daily living, self-help and survival skills. Children are provided with opportunities to participate in emancipation and vocational programs as appropriate.

Recommendation

None.

IV. Recreation and Activities

Method of assessment – Review of relevant documents and interviews

Sample size: Four

Comments:

The Group Home provides children with sufficient recreational activities and leisure time. Children are provided with opportunities to participate in planning activities. Children also participate in extra-curricular, enrichment and social activities in which they have an interest. The Group Home provides transportation to and from the activities.

Recommendation

None.

V. Psychotropic Medication

Method of assessment - Review of relevant documents

Comments:

Children have current court authorizations for psychotropic medication. There is documentation to confirm that children taking psychotropic medications are routinely seen by the prescribing psychiatrist.

Children are informed about their psychotropic medication and are aware of their right to refuse medication. Medication distribution logs are properly maintained.

Recommendation

None.

VI. Personal Rights

Method of assessment - Interviews with children

Sample size: Four

Comments:

Children are informed about the Group Home's policies and procedures. Children report that they feel safe in the Group Home and are provided with appropriate staff supervision. Children express satisfaction with the quality of their interactions with staff and report that the staff treats them with respect and dignity.

Children report that they are assigned chores that are reasonable and not too demanding. Children are allowed to make and receive personal telephone calls, send and receive unopened mail and have private visitors. Children attend religious services of their choice.

Children report that the discipline policies are consistently enforced and that there are fair and appropriate consequences for inappropriate behavior.

Children report satisfaction with meals and snacks. Children also receive voluntary medical, dental and psychiatric care.

Recommendation

None.

VII. Clothing and Allowance

Method of assessment - Review of relevant documents and interviews

Sample size: Four

Comments:

The Group Home provides appropriate clothing, items of necessity and the required \$50 monthly clothing allowance to children. Children are provided with opportunities to select their own clothes. Clothing provided to children is of good quality and of sufficient quantity.

Children spend their allowances as they choose. However, the Group Home does not provide all children with the required minimum weekly allowance.

The Group Home provides children with adequate personal care items. Children are also encouraged and assisted in creating and maintaining photo albums/life books.

Recommendation

3. Hathaway-Sycamores management provide all children with the required minimum weekly allowance.

VIII. Personnel Background Checks

Method of assessment - Review of relevant documents

Sample size for employee record evaluation: Sixty-eight

Comments:

The Group Home has obtained the required criminal and child abuse clearances for their employees.

Recommendation

None.

Hathaway-Sycamores Children and Family Services Corrective Action Plans County of Los Angles Department of Auditor Controller Children's Group Home Ombudsman Division

December 28, 2008

I. Facility and Environment

Recommendation 1.a. Repair the exterior stucco of the nurses building.

Status: The Nursing building stucco repair is currently in progress. The repairs are projected to be completed by 1/31/09.

See Exhibit A (picture)

Plan to prevent reoccurrence: N/A

Person responsible for implementing corrective action: Director of Plant Operations.

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Program Director.

Recommendation 1.b Repair Roof on Baldwin Cottage.

Status: Baldwin Cottages roof has been replaced.

See Exhibit B (picture)

Plan to prevent reoccurrence: N/A

Person responsible for implementing corrective action: Director of Plant Operations.

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Program Director.

Recommendation 1.c. Clean or replace the dinning hall carpet.

Status: The Carpet in the dining hall has been cleaned and repaired.

See Exhibit C (picture)

Plan to prevent reoccurrence: The dining hall supervisor will inspect the carpet weekly along with ensuring maintenance request are submitted and logged. House keeping staff will ensure that carpet cleaning and repairs are completed in a timely manner.

Person responsible for implementing corrective action: Director of Plant Operations.

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Program Director.

Recommendation 1.d. Clean the wall, kitchen ceiling and blinds in Baldwin cottage.

Status: This unit was closed and all children removed on 10/28/08.

Recommendation 1.e. Clean stovetop in Rowland cottage.

Status: The stovetop has been cleaned.

See Exhibit E (picture)

Plan to prevent reoccurrence: The unit supervisor will ensure that staff check stovetop daily and clean it as needed.

Person responsible for implementing corrective action: The unit supervisor

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Program Director.

Recommendation 1.f. Remove the mildew in the shower and writing from the bathroom door in Rowland cottage.

Status: The mildew in the shower and the writing on the door has been cleaned by the house keeping staff.

See Exhibit F (pictures)

Plan to prevent reoccurrence: The unit supervisor will supervise lead staff around inspecting the showers weekly to ensure that they are clean.

Person responsible for implementing corrective action: The unit supervisor

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Program Director.

Recommendation 1.g. Repair the stove top burner in Hunter cottage.

Status: The stovetop burner in Hunter cottage was replaced.

See Exhibit G (picture)

Plan to prevent reoccurrence: The unit supervisor will ensure that maintenance request are submitted while also keeping a copy of the submitted maintenance request, the maintenance staff will then ensure that the repairs are completed in a timely manner.

Person responsible for implementing corrective action: The unit supervisor

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Program Director.

Recommendation 1.h. Repair and clean the bedroom walls and closets as needed.

Status: The bedroom walls have been cleaned in both Rowland and Hunter cottage. In some of the rooms the walls were re-painted since the last visit from the Auditor Controller. The closets have also been cleaned, and some of the more severely scarred are in the process of being sanded and re-finished.

Plan to prevent reoccurrence: The unit supervisor will supervise the shift leads around inspecting and preventing the defacing of the bedroom walls and dressers. In the cases that it is not prevented the unit supervisor will then submitted a maintenance request for repair while also keeping a copy for their own record to ensure the boy's rooms are kept up to standard, the maintenance staff will ensure repairs are completed in a timely manner.

Person responsible for implementing corrective action: The unit supervisor

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Program Director.

Recommendation 1.i. Replace the bedroom bulletin boards and desks.

Status: The replacement of the bulletin boards and desks in Rowland and Hunter will begin at the start of the new year. In the past few months the bulletin boards and desk that were noted as bad during the Audit have been sanded down and re-finished or painted.

Plan to prevent reoccurrence: The unit supervisor will supervise the shift leads around inspecting and preventing the defacing of the bedroom desks and bulletin boards. In the cases that it is not prevented the unit supervisor will then submitted a maintenance request for repair while also keeping a copy for their own record to ensure the boy's

rooms are kept up to standard, the maintenance staff will ensure repairs are completed in a timely manner.

Person responsible for implementing corrective action: The unit supervisor

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Program Director.

II. Program Services

Recommendation 2 El Nido Group Home management input from the Treatment Team in the development and implementation of the Needs and Service plan.

Status: Input from Treatment team in the development and implementation of the needs and service plan is accomplished through the individually assigned Residential Social Worker. The Residential social workers are made aware of treatment team schedules and attend when their individual clients are on the agenda. Information is then gathered from Treatment Teams meetings and utilized in the Needs and Service Plan. If for any reason the RSW is unable to attend a treatment team meeting the program Supervisor will ensure the treatment team minutes are e-mailed to the RSW. Additionally, the program supervisor or the client's key staff attends the individual clients meetings facilitated by the RSW in which the needs and service plans are developed, implemented and evaluated.

Plan to prevent reoccurrence: To further ensure the above process happens the supervisor of the RSW (Jane Whitmore) will insure the flow of communication occurs along with the completion of the Needs and Service Plans/ Quarterly Reports.

Person responsible for implementing corrective action: The Supervisor of the Residential Social Workers (Jane Whitmore)

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: The Vice President of Residential Services

III. Education and Emancipation Service.

There were no recommendations for this section.

IV. Recreation and Activities

There were no recommendations for this section.

V. Psychotic Medication
There were no recommendations for this section.

VI. Personal Right

There were no recommendations for this section.

VII. Clothing And Allowance

Recommendation 3 El Nido Home to provide all children with the required minimum weekly allowance.

Status: Each resident is provided with allowance that is in compliance with the Hathaway-Sycamores statement of work and DCFS requirements. Children between the ages of 6-12 receive at least \$5.00 per week and children 13-17 receives \$7.00 per week. The unit Lead Youth Specialist maintains weekly records of the allowance along with insuring that the client's allowance is placed in the child's account. The children also sign to confirm the receipt of their allowance.

Plan to prevent reoccurrence: It is the responsibility of the Unit Supervisor to check this process weekly for accuracy and completeness. The supervisor will inform the child of the amount of his allowance during the orientation period. In addition the Director of Residential Services will ensure that the accounts are maintained and updated.

Person responsible for implementing corrective action: The unit supervisor

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Program Director.

It is our policy and practice to make sure that we are in compliance with our contract, DCFS, Probation and Title 22 requirements. We will continue to monitor ourselves to ensure that we are in compliance.

Thank you for your time and consideration, if you have any questions please contact me.

Sincerely,

Shawn Bettencourt

Director of Residential Services

(626) 395-7100 Ext. 6268